

1724

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 23, 2004.

Theodore P. Cummings, Esq. 40,973  
Name of Attorney/Agent Registration No.  
Signature of Attorney

IN THE UNITED STATES PATENT & TRADEMARK OFFICE  
RESPONSE/AMENDMENT

Mail Stop Non-Fee Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Application No. : 09/574,456  
Applicant(s) : Mario Elam Tremblay, et al.  
Filed : May 19, 2000  
Title : METHOD FOR REMOVAL OF NANO-SIZED PATHOGENS  
FROM LIQUIDS  
TC/A.U. : 1724  
Examiner : Ivars C. Cintins  
Conf. No. : 7765  
Docket No. : 7568M  
Customer No. : 27752

1. ☒ No additional fees (claims fees or extension fees) are known to be required.
2. ☐ The fee has been calculated as shown below:

|   | (Col. 1)                                  |       | (Col. 2)                              | (Col. 3)          | OTHER THAN A<br>SMALL ENTITY |     |
|---|---|-------|---------------------------------------|-------------------|------------------------------|-----|
|   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA* | RATE                         | FEE |
| TOTAL                                     | * 5                                       | MINUS | **                                    | =                 | x \$18 =                     | \$  |
| INDEP.                                    | * 1                                       | MINUS | ***                                   | =                 | x \$86 =                     | \$  |
| FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |   |       |                                       |                   | + \$290 =                    | \$  |
|   |   |       |                                       |                   | TOTAL                        | \$  |

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.

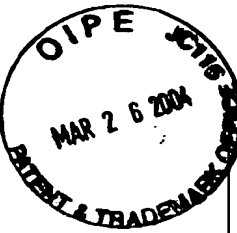
\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
  - a. ☒ Any patent application processing fees under 37 CFR §1.16.
  - b. ☒ Any patent application processing fees under 37 CFR §1.17.
4. The Director is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

Theodore P. Cummings, Esq.  
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Registration No. 40,973  
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March 23, 2004



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Theodore P. Cummings, Esq. 40,973  
Name of Attorney Registration No.  
\_\_\_\_\_  
Signature of Attorney

P&G Case No. 7568M

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of :  
MARIO ELMEN TRENBLAY, ET AL. : Confirmation No. 7765  
Serial No. 09/574,456 : Group Art Unit: 1724  
Filed: May 19, 2000 : Examiner: I. C. Cintins  
For METHOD OF REMOVAL OF NANO-SIZED PATHOGENS FROM LIQUIDS

**AMENDMENT UNDER 37 CFR §1.111**

Mail Stop Non-Fee Amendment  
Honorable Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**INTRODUCTORY REMARKS**

In response to the Office Action dated December 23, 2003 please accept the enclosed Amendment.

**Amendments to the Claims** are reflected in the listing of claims that begin on page 2 of this paper.

**Remarks/Arguments** begin on page 3 of this paper.